

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b> <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>		Attorney Docket No. <b>F8860.0001/P001-A</b>	
		First Inventor <b>Ruth Frank</b>	
		Title <b>STORAGE TRAY</b>	
		Express Mail Label No.	
<b>APPLICATION ELEMENTS</b> <small>See MPEP chapter 600 concerning utility patent application contents.</small>		<b>ADDRESS TO:</b> MS Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	
<div>1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <small>(Submit an original, and a duplicate for fee processing)</small></div> <div>2. <input type="checkbox"/> Applicant claims small entity status. <small>See 37 CFR 1.27.</small></div> <div>3. <input checked="" type="checkbox"/> Specification <span style="float: right;">[Total Pages <b>22</b>]</span> <small>(preferred arrangement set forth below)</small><ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross Reference to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul></div> <div>4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) <span style="float: right;">[Total Sheets <b>6</b>]</span></div> <div>5. Oath or Declaration <span style="float: right;">[Total Sheets <b>  </b>]</span><div style="margin-left: 20px;"><div>a. <input type="checkbox"/> Newly executed (original or copy)</div><div>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 18 completed)</small></div><div>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> <small>Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small></div></div></div> <div>6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76</div>		<div>7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)</div> <div>8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)<div style="margin-left: 20px;">a. <input type="checkbox"/> Computer Readable Form (CRF)</div><div style="margin-left: 20px;">b. Specification Sequence Listing on:<div style="margin-left: 20px;">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> Paper</div></div><div style="margin-left: 20px;">c. <input type="checkbox"/> Statements verifying identity of above copies</div></div>	

**ACCOMPANYING APPLICATION PARTS**

9. ☐ Assignment Papers (cover sheet & document(s))

10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney  
(when there is an assignee)

11. ☐ English Translation Document (if applicable)

12. ☒ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations

13. ☒ Preliminary Amendment

14. ☒ Return Receipt Postcard (MPEP 503)  
(Should be specifically itemized)

15. ☐ Certified Copy of Priority Document(s)  
(if foreign priority is claimed)

16. ☐ Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i).  
Applicant must attach form PTO/SB/35 or its equivalent.

17. ☐ Other:

FEE TRANSMITTAL for FY 2004		Complete if Known	
Effective 10/01/2003, Patent fees are subject to annual revision.		Application Number	NOT YET ASSIGNED
		Filing Date	December 3, 2003
		First Named Inventor	Ruth Frank
		Examiner Name	Not Yet Assigned
		Art Unit	N/A
		Attorney Docket No.	F8860.0001/P001-A
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$)		557.00	

  

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)																																																																																																																																																																																			
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<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: <span style="border: 1px solid black; padding: 2px 20px;">04-1073</span> Deposit Account Name: <span style="border: 1px solid black; padding: 2px 20px;">Dickstein Shapiro Morin &amp; Oshinsky LLP</span> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s) <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.		<table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - 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**or number previously paid, if greater; For Reissues, see above		Other fee (specify) _____ *Reduced by Basic Filing Fee Paid <b>SUBTOTAL (3)</b> (\$) 0.00																																																																																																																																																																																			

  

SUBMITTED BY		(Complete if applicable)	
Name (Print/Type)	Jon D. Grossman	Registration No. (Attorney/Agent)	32,699
Signature		Telephone	(202) 828-2279
		Date	December 3, 2003